

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant

Fisher et al.

Serial No.

09/515,369

Examiner

Sullivan, Daniel M.

Filed

Februa

February 29, 2000

Group Art Unit:

1636

For

MELANOMA DIFFERENTIATION ASSOCIATED GENE-7 PROMOTER

AND USES THEREOF

SUPPLEMENTAL AMENDMENT

I hereby certify that this paper is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

March 1/2, 2004
Date of Deposit

Lisa B. Kole

35,225

PTO Registration No.

Signature

March 12, 2004

Date of Signature

Assistant Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

In response to the Office Communication dated February 23, 2004, in which the Examiner deemed Applicants' reply of December 5, 2003 to be non-responsive, Applicants herein submit a Supplemental Amendment. Also enclosed is an executed Revocation and Power of Attorney document.

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this communication.

Remarks begin on page 6 of this communication.

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	09/515,369
Filing Date	02/29/00
First Named Inventor	Fisher
Group Art Unit	1636
Examiner Name	Sullivan, D.
Attorney Docket Number	A34611 (070050.1685)

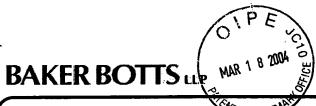
Total Number of Pages in This Subm	ission Attorney Docket Number	A34611 (070050.1685)	
ENCLOSURES (check all that apply)			
Fee Transmittal Form Fee Attached Amendment / Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Response to Missing Parts/ Incomplete Application Response to Missing Parts	Assignment Papers (for an Application) Drawing(s) Licensing-related Papers Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address Terminal Disclaimer Request for Refund CD, Number of CD(s) Remarks	After Allowance Communication to Group Appeal Communication to Board of Appeals and Interferences Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please identify below): Return Receipt Postcard	
under 37 CFR 1.52 or 1.53			
SIGNATU	IRE OF APPLICANT, ATTORNEY, OR	AGENT	
Firm BakerBotts LLP 30 Rockefeller Pl. Individual name New York, NY 10	aza 1112) Att Name:	Lisa B. Kole	
UNA2	PTO Reg		
Date Signed March 12, 2004	Date filed r	Mar. 15, 2004	
CERTIFICATE OF MAILING			

	CERTIFICATE OF M	IAILING	
	ondence is being deposited with the United Stat o: Commissioner for Patents, PO Box 1450, Ale		
Typed or printed name	Lisa B. Kole		75
Signature	Men Bligh	Date March 12, 2004	4

BAKER BOTTS LLP

Attorney Docket Number: A34611 (070050.1685)

Title:	MELANOMA DIFFERENTIATION ASSOCIATED GENE-7 PROMOTER AND USES THEREOF
Use Spac	ce Below for Additional Information:
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FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

Signature

(\$)	0
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Complete if Known		
Application Number	09/515,369	
Filing Date	02/29/00	
First Named Inventor	Fisher	
Examiner Name	Sullivan, D.	
Art Unit	1636	
Attorney Docket No.	A34611 (070050.1685)	

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)			
Check Credit card Money Order None				
Deposit Account:	Large Entity Small Entity			
Deposit 00 4277	Fee Fee Fee Fee Fee Description Code (\$)	ee Paid		
Account Number	1051 130 2051 65 Surcharge - late filing fee or oath	***		
Deposit Account Baker Botts LLP	1052 50 2052 25 Surcharge - late provisional filing fee or cover sheet			
Name	1053 130 1053 130 Non-English specification			
The Commissioner is authorized to: (check all that apply) Charge fee(s) indicated below Credit any overpayments	1812 2,520 1812 2,520 For filing a request for ex parte reexamination			
Charge any additional fee required under 37CFR 1.16 and 1.17	1804 920* 1804 920* Requesting publication of SIR prior to			
Charge fee(s) indicated below, except for the filing fee	Examiner action 1805 1,840* 1805 1,840* Requesting publication of SIR after			
to the above-identified deposit account.	Examiner action			
FEE CALCULATION	1251 110 2251 55 Extension for reply within first month	1		
1. BASIC FILING FEE	1252 420 2252 210 Extension for reply within second month			
Large Entity Small Entity	1253 950 2253 475 Extension for reply within third month			
Fee Fee Fee Fee Fee Description Fee Paid Code (\$) Code (\$)	1254 1,480 2254 740 Extension for reply within fourth month			
1001 770 2001 385 Utility filing fee	1255 2,010 2255 1,005 Extension for reply within fifth month			
1002 340 2002 170 Design filing fee	1401 330 2401 165 Notice of Appeal			
1003 530 2003 265 Plant filing fee	1402 330 2402 165 Filing a brief in support of an appeal			
1004 770 2004 385 Reissue filing fee	1403 290 2403 145 Request for oral hearing			
1005 160 2005 80 Provisional filing fee	1451 1,510 1451 1,510 Petition to institute a public use proceeding			
SUBTOTAL (1) (\$) 0	1452 110 2452 55 Petition to revive - unavoidable			
	1453 1,300 2453 650 Petition to revive - unintentional			
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE Fee from	1501 1,330 2501 665 Offility issue fee (or reissue)			
Ext <u>ra Claims below</u> Fee Paid				
Total Claims - 20 = 0 X = 0	1503 630 2503 315 Plant issue fee			
Claims Multiple Dependent	1460 130 1460 130 Petitions to the Commissioner			
Wulliple Dependent	1807 50 1807 50 Processing fee under 37 CFR 1.17(q)			
Large Entity Small Entity	1806 180 1806 180 Submission of Information Disclosure Stmt			
Code (\$) Code (\$)	8021 40 8021 40 Recording each patent assignment per property (times number of properties)			
1202 18 2202 9 Claims in excess of 20	1809 770 2809 385 Filing a submission after final rejection			
1201 86 2201 43 Independent claims in excess of 3	(37 ČFR 1.129(a))			
1203 290 2203 145 Multiple dependent claim, if not paid	d 1810 770 2810 385 For each additional invention to be examined (37 CFR 1.129(b))			
1204 86 2204 43 ** Reissue independent claims over original patent	1801 770 2801 385 Request for Continued Examination (RCE)			
1205 18 2205 9 ** Reissue claims in excess of 20	1802 900 1802 900 Request for expedited examination			
and over original patent	of a design application Other fee (specify)	, 		
SUBTOTAL (2) (\$) 0	Other red (specify)	<u> </u>		
**or number previously paid, if greater, For Reissues, see above *Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)0				
SUBMITTED BY (Complete (if applicable)				
Name (Print/Type) Lisa/B. Kole // //	Registration No. (Attorney/Agent) 35,225 Telephone (212) 408-26	28		

filed Mar. 15, 2004

March 12, 2004

Date